Lindsay E. Nadeau (Print Name of lobbyist)

PLEASE PRINT

### STATE OF NEW HAMPSHIRE

### 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### RECEIVED

JUL 25 2018

**NEW HAMPSHIRE** 

### DEPARTMENT OF STATE I. Name of Lobbyist(s) George W. Roussos and Lindsay E. Nadeau II. Name of lobbyist's partnership, firm or corporation, if any: Orr & Reno, P.A. (Name of partnership, firm or corporation) 45 S. Main Street, P.O. Box 3550 Concord Business Address: (Street) (Town/City) (603) 224-2318 (603) 224-2381 e-mail Inadeau@orr-reno.com (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). 🖾 All reportable transactions occurring in the months prior to the reporting date relative to the following client: AmeriHealth Caritas (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 25, 2018 🗌 July 25, 2018 🗵 Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 January 30, 2019 🗌 October 31, 2018 activity from 10/1/18 to 12/31/18 activity from 7/1/18 to 9/30/18 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House. Room 204. Concord. NH 03301. VI. Check if additional reports are attached: 🛛 If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses [] If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement [] If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Date)

# P L E A S E P R I N T

## STATE OF NEW HAMPSHIRE

### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) George W. Roussos and Lindsay E.			
II. Name of lobbyist's partnership, firm or corporation, if any	<b>y:</b>		
Orr & Reno, P.A. (Name of partnership, firm or corporation)	<del></del>		
III. Name of Client AmeriHealth Caritas	Date _ <u>07/</u>	Date <u>07/25/18</u>	
IV. Fees Received Indicate the gross amount of all fees received from the client identified to lobbying, including fees for services such as public advocacy, governeluding research, monitoring legislation, and related legal work, reduced by any expenses:	ernment relations, or pu	iblic relations services	
a) Total of all fees received in this reporting period	a) \$	27,000.00	
b) Total of all fees received this calendar year, prior to this reporting p (This should equal the total of all prior monthly reports for this cale		18,900.00	
c) Total of all fees received to date (Add lines a and b)	c) \$	45,900.00	
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$	292.00	
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required fees. Separate reports are to be filed for expenditures made relative to the lobbyist(s)/firm that are unrelated to any one client a separate Expenses are to be reported in one of three categories of expenses: during the reporting period for salaries, benefits, support staff, and continuously individual expenses where the expenditure was of \$25.00 or less (for lunch where the cost was \$25.00 or less, purchase of a pen with a value being lobbied, purchase of a ceremonial object given to a person being (c) an itemized statement of each individual expenditure made during to any purpose not covered by (a) (for example: purchase of a meal was ceremonial object to be given to the subject of lobbying with a value restaurant expenses for a legislative reception). Expenses for honor contributions will be reported on separate addendums and should not be	o each client and if expreport may be filed for (a) the aggregate total office expenses; (b) the example: meals purchase of less than \$10 that g lobbied with a value this reporting period of with value of greater than \$25, but rariums, expense reimb	renditures are made by or the lobbyist(s)/firm of all expenses paid aggregate total of all ased during a business is given to the persor of \$25.00 or less); and greater than \$25.00 fo an \$25, purchase of a not greater than \$50 bursement, or politica	
a) Total aggregate expenses for this reporting period for salaries, bene support staff, and office expenses, related directly or indirectly to lobby	ying. a) \$	0.00	
<ul> <li>b) Total aggregate of expenditures during this reporting period, not re in a), of \$25 or less.</li> </ul>	b) \$	0.00	
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00	

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0.00_
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	100.00
f) Total of all expenses year to date	f) \$	100.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during th	nis reporting
Paid to:	Amount:	
<u> </u>	\$	
	\$	
	\$	
	\$	
<u> </u>	\$	
	\$	· <del></del>
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing	; information
is true and complete to the best of my knowledge and belief.		
(Signature of lobbyist)	07/25/18	
(Signature of lobbyist)	(Date)	
Lindsay E. Nadeau		
(Print Name of lobbyist)		•

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# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying p	partnership, firm, or corp	oration: Orr & Reno, P.	Α.
Name of Client (leav	ve blank if Statement is f	or the partnership, firm, or	corporation and not related to a
particular client):	AmeriHealth Caritas		·
Date of Report (chec	ck one):		
April 25, 2018 □	July 25, 2018 🖾	October 31, 2018 🗆	January 30, 2019 □
			nd Expenses described above, a umber of Addendum forms bei
_l Addendum A	A(s).		
Addendum I	B(s).		
Addendum (	C(s).		
	firm that the foregoing it of my knowledge and be		nt and each Addendum is true a
4ma	elun		07/25/18
(Signature of lobbyis	st)		(Date)
Lindsay E. Nadea			